

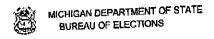
## MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

## CANDIDATE COMMITTEE **COVER PAGE**

## FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 5-26-69 12-31-69	
1. Committee I.D. Number	Candidate Last Name First Name M.I.	
137402	Chiodini Henry C	
2. Committee Name	4a. Office Saught Including District # or Community Served (If applicable)	
	School Board	
CTE henry chiodini	4b. County of Residence Macomb	
5. Committee's Mailing Address	6. Treasurer's Name & Residential Address	
46891 edgewater	Henry Chiodini no	
Macomb Mi. 48044	46891 Edgewater 章号。	
	Macomb Mi. 48044	
(Enc.) pag 2000	375	
Area Code and Phone (586) 286-8808	i co	
If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone	
7. Treasurer's Business Address	Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)	
	Designated Record keeper)	
Area Code and Phone	Area Code and Phone	
9. TYPE OF STATEMENT		
9a. Pre-Election OR 9b. Pos	1-Election 9c. Annual Statement (2009 Coverage Year)	
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a. 9b, 9c or 9e to indicate which Statement is being amended)	
Primary	neral 9e. Dissolution of Candidate Committee	
Land Cilliary Land	Effective Date of Dissolution	
Convention	hool	
Special Car	By checking this item, I/We certify that the committee has no assets or	
Date of Election, Convention or Caucus	outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.	
	Note: The disposition of residual funds must be reported on Schedule	
A committee that does not have a Departies Waiver must file all a	1B and the Summary Page.	
Schedules. Direct contributions, in-kind contributions, loans, expiring any of the information listed in items 2, 4, 5, 6, 7, or 8 has changamendment to the Statement of Organization should accompany before the filling deadline of a required campaign statement.	equired Campaign Statements. The Campaign Statements must include all applicable and interest and outstanding debts count against the \$1,000 Reporting Waiver threshold. Statement of Organization, and this Campaign Statement. If a request for a Reporting Waiver is not received on or that campaign statement cannot be waived.	
	in the preparation of this statement and attached schedules (if any) and to the best of	
	21 1	
Current Treasurer or Henry Chiodini Designated Record keeper	, -/+ Ch Date 2-4-10	
Type or Print Name	Signature Date	
Candidate Henry Chiodini	, Mr.Clan Date 2-4-10	
Type or Print Name	Ślgnature	

Authority granted under P.A. 388 of 1976



1. Committee 1.D. Number 137402

SUMMARY PAGE
2. Committee Name CTE Henry Chiodini

CANDIDATE COMMITTEE	Calumn	Column II Cumulative this election cycle
ECEIPTS	This Period	Chumistos tas electron chare
Contributions	(3a.) \$ 4,225.81	
a. (ternized (Schedule 1A - Column 6)		
b. Uniternized (less than \$20.01 each - no Schedule)	(3b.) \$ NOT APPLICABLE (3c.) \$ \$4,225.81	(18.) \$ \$7,075.81
c. Subtotal of "Contributions"	(4.) \$ \$0.00	(19.) \$ \$0.00
. Other Receipts (Schedule 1A -1, Column 6)	(5.) \$ \$4,225.81	(20.) \$ \$7,075.81
i, TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$ \$ \$ \$	
N-KIND CONTRIBUTIONS & EXPENDITURES	(6.) \$ \$0.00	(21.) \$ \$0.00
5. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$ <del>50.00</del>	(22.) \$ \$0.00
7. In-Kind Expenditures (Schedule 18-IK, Column 6)	(7.) \$	(
EXPENDITURES		
8. Expenditures	(8a.) \$ \$4,382.93	
a. Itemized (Schedule 1B, Column 6)	(8b.) \$ \$0.00	
<ul> <li>b. Itemized Get-Out-the-Vote (Schedule 1B-G)</li> </ul>	(8c.) \$ \$0.00	
c. Uniterrixed (less than \$50.01 each - no Schedule)	(8c.) \$ <del>\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ </del>	(23.) \$ \$6,962.26
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$ <del>\psi  </del>	(200)
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)		
10. Disbursements a. Itemized (Schedule 1C, Column 6)	(10a.) \$ \$0.00	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$ \$0.00	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$ \$0.00	(24.) \$ \$0.00
DEBTS AND OBLIGATIONS 12. Debts and Obligations	(12a.) \$ \$0.00	
a. Owed by the Committee (Schedule 1E)		
b. Owed to the Committee (Schedule 1E)	(12b.) \$ \$0.00 BALANCE STATEMENT	
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(13.) \$ \$4.395.81 (14.) + \$ \$4.395.81 (15.) = \$ \$4.395.46 [M 3.55]	-  -
15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCE (Subtract line 16 from line 15)	(16.) - \$ \$4:22.93 (17.) \$ \$113.55	•